## ITEA Form #3

Appeal Number:	
<b>Original Tracking Number:</b>	

## REQUEST FOR APPEAL OF TECHNICAL ARCHITECTURE DECISION

This form is to be used to request a review or hearing on a previous decision by the Architecture Oversight Committee. Once, complete, the requester may submit this form either manually or electronically to the Division of the State Chief Information Officer. Where possible, additional information should be submitted to enhance assessment. This additional information may be submitted with this form either manually or electronically. If submitting information manually, mail to: Division of State CIO, 1201 Main Street, Suit 820, Columbia, SC 29201.

Street, Suit 820, Columbia, SC 29201.	ally, mail to: Division of State ClO, 1201 Main	
BASIC INFORMATION (required for all requests):		
Name of Requestor:	Submittal Date:	
Agency:	Telephone Number:	
Address:	Email Address:	
Position:	Fax Number:	
Architecture Domain:	Discipline:	
Agency Director/Committee Chair Authorization: (if app	olicable)	
SCOPE OF APPEAL: (Provide a description of the appeal would impact a previous decision made by the Architecture		
PRIORTY:		
☐ High Priority (significant impact on agency operation		
☐ Medium Priority (normal processing)		
□ Low Priority (can be delayed if necessary)		
REASONS FOR THE APPEAL:		
Addresses issues/concerns outlined in the origin	nal decision	
Describe any additional relevant information re	egarding the appeal.	
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BUSINESS JUSTIFICATION FOR APPEAL:
ADDITIONAL DEGREE OF THE STATE
ADDITIONAL BACKGROUND: (List pertinent information and analysis used in preparing this
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